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Bib Data Sheet

CONFIRMATION NO. 6449

<b>SERIAL NUMBER</b> 09/921,143	<b>FILING OR 371(c) DATE</b> 08/03/2001 <b>RULE</b>	<b>CLASS</b> 435	<b>GROUP ART UNIT</b> 1653	<b>ATTORNEY DOCKET NO.</b> PF112P6
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**APPLICANTS**

Timothy Coleman, Gaithersburg, MD;

**\*\* CONTINUING DATA \*\***

OK This appln claims benefit of 60/223,276 08/04/2000  
CA

**\*\* FOREIGN APPLICATIONS \*\***

N/A

IF REQUIRED, FOREIGN FILING LICENSE GRANTED

\*\* 09/27/2001

Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	<b>STATE OR COUNTRY</b> MD	<b>SHEETS DRAWING</b> 55	<b>TOTAL CLAIMS</b> 18	<b>INDEPENDENT CLAIMS</b> 2
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged Examiner's Signature	Initials			

**ADDRESS**

22195

**TITLE**

Vascular endothelial growth factor-2

<b>FILING FEE RECEIVED</b> 840	<b>FEES:</b> Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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